

FFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/636,164 Confirmation No.: 3599
Applicant : Robert A. Kerr II
Filing Date : August 6, 2003
Title : System and Method for Collecting and Transmitting Medical Data
Group Art Unit : 3742
Examiner : John A. Jeffrey
Docket No. : 13357.4002
Customer No. : 34313

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Transmitted herewith is an amendment in the above-identified application in connection with the Office Action dated October 28, 2004.

Applicant hereby petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$60.00	\$120.00
<input type="checkbox"/> two months	\$225.00	\$450.00
<input type="checkbox"/> three months	\$510.00	\$1,020.00
<input type="checkbox"/> four months	\$795.00	\$1,590.00
<input type="checkbox"/> five months	\$1,080.00	\$2,160.00
	Fee	\$0.00

If an additional extension of time is required, please consider this a petition therefor.
Fee Calculation: TOTAL AMOUNT OF PAYMENT: \$ 0.00

CERTIFICATE OF MAILING
37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that this paper or fee (along with any referred to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated: January 24, 2005

Sally Hartwell

Applicant : Robert A. Kerr II
Appl. No. : 10/636,164
Examiner : John A. Jeffery
Docket No. : 13357.4002

- A. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 15-0665.
 Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 15-0665.
- B. Payment Enclosed
 Check Credit Card Money Order Other

Total Claims	67	-	24	=	43	x	\$50.00	\$2,150.00
Independent Claims	6	-	3	=	3	x	\$200.00	\$600.00
Application Size Fee <small>(\$250 for each additional 50 sheets or fraction thereof)</small>	17	-	100	=	100	x	0.00	0.00
Multiple Dependent Claims	\$360	(if applicable)	<input type="checkbox"/>					\$0.00
Surcharge 37 CFR § 1.16(e)	\$130	(if applicable)	<input type="checkbox"/>					\$0.00
TOTAL OF ABOVE CALCULATIONS								\$2,750.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.	<input checked="" type="checkbox"/>							1,375.00
Extension of Time (from above)								\$0.00
Statutory Disclaimer								\$65.00
Assignment -- \$40 (if applicable)	<input type="checkbox"/>							\$0.00
TOTAL FEES SUBMITTED HEREWITH								\$1,440.00

Respectfully submitted,

Dated: January 24, 2005

By: Donald Daybell
Donald Daybell
Reg. No. 51,877

Orrick, Herrington & Sutcliffe LLP
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Telephone: 949-567-6700
Facsimile: 949-567-6710
Customer Number: 34313



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RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action dated October 28, 2004, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of this paper.

Remarks begin on page 13 of this paper.

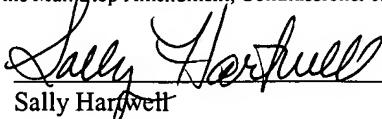
02/01/2005 MWOLIDGE1 00000006 150665 10636164

01 FC:2201 300.00 DA
02 FC:2202 1075.00 DA

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Dated: January 24, 2005


Sally Harrell